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23875 7590 08/23/2005

MOLLY D MCKAY, PC
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Molly D. McKay	(Depositor's name)
<i>Molly D. McKay</i>	(Signature)
11/21/2005	(Date)

11/22/2005 TBESHAH2 00000062 130470 10822574

01 FC:2501 700.00 DA
 02 FC:1594 300.00 DA

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10822,574	04/12/2004	Thomas E. Allen	M4605.012	2629

TITLE OF INVENTION: METERING VALVE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	11/23/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHAMBERS, A MICHAEL	3753	137-001000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Molly D. McKay

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 130470 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(a)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature

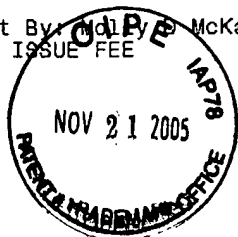
Molly D. McKay
 Typed or printed name **Molly D. McKay**

Date 11/21/2005

Registration No. 35609

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FAX TRANSMISSION

To: Mail Stop Issue Fee @ the U.S. Patent and Trademark Office
Fax #: 1-571-273-2885
From: Molly D. McKay
Date: November 21, 2005

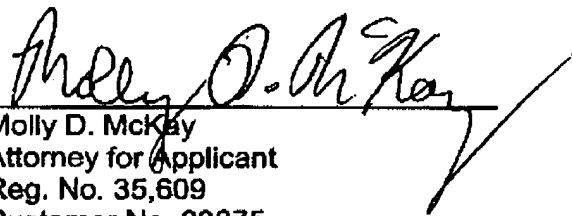
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Message:

Attached is the Issue Fee Transmittal page (in duplicate) for payment of Issue & Publication Fee regarding the following:

Application No.: 10/822574
Filing Date: 04/12/2004
Inventor: THOMAS E. ALLEN
Atty. Docket No.: M4605.012
Confirmation No.: 2629


Molly D. McKay
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